

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines

12FE4M5

Fimian For Congress

ADDRESS (number and street)

PO Box 3131

☐ (Check if address is changed)

Oakton

VA

22124

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

FimianForCongress@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.FimianForCongress.com

COMMITTEE'S FAX NUMBER

7038426064

2. DATE

M	M
0	1

 /

D	D
1	7

 /

Y	Y	Y	Y
2	0	0	8

3. FEC IDENTIFICATION NUMBER

C C00437210

4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer **Robert Burton**Signature of Treasurer Electronically Filed by **Robert Burton**

Date

M	M
0	1

 /

D	D
1	7

 /

Y	Y	Y	Y
2	0	0	8

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
Candidate

Keith Fimian

Candidate
Party Affiliation

REP

Office
Sought:☒

House

☐

Senate

☐

President

State

VA

District

11

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate

- (d) ☐ This committee is a (National, State
(or subordinate) committee of the (Democratic,
Republican, etc.) Party.

- (e) ☐ This committee is a separate segregated fund

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

None

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

Write or Type Committee Name

Fimian For Congress

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Robert Bruton**

Mailing Address **PO Box 3131**

Oakton **VA** **22124** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Custodian of Records Telephone number **518** - **524** - **7510**

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Robert Bruton**

Mailing Address **PO Box 3131**

Oakton **VA** **22124** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Treasurer Telephone number **504** - **882** - **3047**

Full Name of Designated Agent **Joseph Bullock, Jr.**

Mailing Address **7332 Dartford Drive**

Mclean **VA** **22102** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Assistant Treasurer Telephone number **703** - **944** - **4842**

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	United Bank		
Mailing Address	2021 Chain Bridge Road		
	Suite 200		
	Vienna	VA	22182 -
	CITY ▲	STATE ▲	ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address			
			-
	CITY ▲	STATE ▲	ZIP CODE ▲